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JUN 29 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 09/823,131  
Applicant : Carl M. Ellison  
Filed : 03/30/2001  
TC/A.U. : 2137  
Examiner : Minh Dicu T. Nguyen

Confirmation No. 6846

Docket No. : 42390P8110  
Customer No. : 8791

Mail Stop Issue Fee  
Commissioner for Patents  
PO Box 1450  
Alexandria VA 22313-1450

COMMENTS ON STATEMENT OF REASONS FOR ALLOWANCE

Sir:

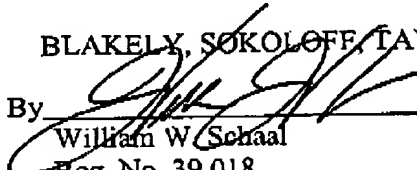
Applicant is assuming that the Examiner's statement of reasons for allowance is to be taken in light of the structure and interaction recited in the claims. Applicant notes that the Examiner's various comments should not be used to read non-existent limitations into the claims.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Dated: June 29, 2006

By

  
William W. Schaal

Reg. No. 39,018

Tel.: (714) 557-3800 (Pacific Coast)

12400 Wilshire Boulevard, Seventh Floor  
Los Angeles, California 90025

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

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Date: 6/29/2006

  
Susan McFarlane

6/29/2006

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<b>FEE TRANSMITTAL for FY 2005</b> <small>Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	09/823,131
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	March 30, 2001
		First Named Inventor	Carl M. Ellison
		Examiner Name	Minh Dieu T. Nguyen
		Art Unit	2137
TOTAL AMOUNT OF PAYMENT		(\$)	0.00
		Attorney Docket No.	42390P8110

**METHOD OF PAYMENT** (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

**FEE CALCULATION**

**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
26	26*	0	\$0.00
Independent Claims	3*	0	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 300	2203 180	Multiple Dependent claim, if not paid
1204 700	2204 300	**Reissue independent claims over original patent
1206 300	2206 150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$) 0.00

\*For number previously paid, if greater, For Reissues, see below

**2. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
2053 130	2053 130	Non-English specification	
1251 120	2251 60	Extension for reply within first month	
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,500	2254 750	Extension for reply within fourth month	
1255 2,100	2255 1,050	Extension for reply within fifth month	
1401 500	2401 250	Notice of Appeal	
1402 500	2402 250	Filing a brief in support of an appeal	
1403 1,000	2403 500	Request for oral hearing	
1451 1,510	2451 1,510	Petition to institute a public use proceeding	
1480 130	2480 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(a)	
1808 180	1808 180	Submission of Information Disclosure Stmt	
1809 700	1809 350	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 700	1810 350	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fees (specify)			
SUBTOTAL (2)		(\$)	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	William W. Schaaf	Registration No. (Attorney/Agent)	39,018
Signature		Telephone	(714) 557-3800
		Date	06/29/06

Based on PTO/SD/17 (12-01) as modified by Blakely, Sokoloff, Taylor & Zafman (wb) 12/15/2004.  
 SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22310-1450

JUN 29 2006  
**BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP**

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LOS ANGELES, CA 90025

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**FACSIMILE COVER SHEET**

Deliver to: Minh Dieu T. Nguyen, USPTO Art Group: 2137  
Facsimile No.: 571-273-3873 Date: June 29, 2006  
From: William W. Schaal, Reg. No. 39,018  
Our Docket No.: 42390P8110 Number of pages 5 including this sheet.  
Application No.: 09/823,131 Filing Date: 3/30/2001  
Docket Due Date(s):           

Enclosed are the following documents:

- |  |   |
|--|---|
| <input type="checkbox"/> Amendment: <u>          </u> ( <u>      </u> pgs)                                 | <input type="checkbox"/> Issue Fee Transmittal                                    |
| <input type="checkbox"/> Appeal Brief ( <u>      </u> pgs)   | <input type="checkbox"/> Notice of Appeal   |
| <input type="checkbox"/> Application: <u>          </u><br>( <u>      </u> pgs) w/cover & abstract)        | <input type="checkbox"/> Petition for: <u>          </u>                          |
| <input type="checkbox"/> Assignment & Cover Sheet ( <u>      </u> pgs)                                     | <input type="checkbox"/> Request for Continued Examination (RCE)                  |
| <input checked="" type="checkbox"/> Certificate of Facsimile <u>          </u>                             | <input type="checkbox"/> Reply Brief ( <u>      </u> pgs)                         |
| <input type="checkbox"/> Continued Prosecution Application (CPA)   | <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)     |
| <input type="checkbox"/> Declaration & POA ( <u>      </u> pgs)  | <input type="checkbox"/> Request to Rescind Previous Nonpublication Request       |
| <input type="checkbox"/> Drawings: <u>      </u> sheets, <u>      </u> figures                             | <input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter |
| <input type="checkbox"/> Extension of Time: <u>          </u>  | <input type="checkbox"/> Response to Written Opinion ( <u>      </u> pgs)         |
| <input checked="" type="checkbox"/> Fee Transmittal (in duplicate)   | <input type="checkbox"/> Terminal Disclaimer                                      |
| <input type="checkbox"/> IDS & PTO/SB/08 ( <u>      </u> pgs)  | <input type="checkbox"/> Transmittal of Publication Fee Due                       |
| <input checked="" type="checkbox"/> Other Comments on Statement of Reasons for Allowance <u>          </u> | <input checked="" type="checkbox"/> Transmittal Letter                            |

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Susan McFarlane

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for FY 2005**

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☐ Applicant claims small entity status. See 37 CFR 1.27.

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**Complete if Known**

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Examiner Name	Minh Dicu T. Nguyen
Art Unit	2137
Attorney Docket No.	42390P8110

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under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

**FEE CALCULATION****1. EXTRA CLAIM FEES**

1. EXTRA CLAIM FEES		Extra Claims	Fee from below	Fee Paid
Total Claims	28	28* = 0	50.00	\$0.00
Independent Claims	3	3* = 0	200.00	\$0.00
Multiple Dependent				

Large Entity		Small Entity		Fee Description
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1451	1,510	2451	1,510	Petition to institute a public use proceeding
1480	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1808	180	1100	100	Submission of Information Disclosure Stmt
1809	790	1800	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	730	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

Fee Paid

**SUBMITTED BY**

Name (Print/Type) William W. Schaal

Registration No.  
(Attorney/Agent)

39,018

Telephone

(714) 557-3800

Signature

Date

06/29/06

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/s) 12/15/2004  
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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		09/823,131	March 30, 2001
		First Named Inventor	Carl M. Ellison
TOTAL AMOUNT OF PAYMENT (\$)		Examiner Name	Minh Dieu T. Nguyen
		Art Unit	2137
		Attorney Docket No.	42390P8110

METHOD OF PAYMENT (check all that apply)	
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<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor &amp; Zafman LLP</u>	
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FEE CALCULATION	
1. EXTRA CLAIM FEES	Extra Fee from Fee Paid

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